

REGION: 04
STATE: GA

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

PAGE: 291
RUN DATE: 85/04/26
RUN TIME: 18131125

M.2 - SITE MAINTENANCE FORM

45761

* ACTION: -

EPA ID: GAD980600522

SITE NAME: GEORGIA-PACIFIC CORP STUD MILL

SOURCE: H

STREET: HWY 83 S

CONG DIST: 06

CITY: MONTICELLO

ZIP: 31064

CNTY NAME: JASPER

CNTY CODE: 159

LATITUDE: 33/16/33.0 LONGITUDE: 083/42/19.0

SMSA: HYDRO UNIT: 03070101

INVENTORY IND: Y REMEDIAL IND: Y REMOVAL IND: FED FAC IND: N

NPL IND: N NPL LISTING DATE: NPL DELISTING DATE:

APPROACH: SITE CLASS:

SITE/SPILL IDS:

RPM NAME: RPM PHONE: - -

DIOXIN TIER: REG FLD1: REG FLD2: 6

RESP TERM: PENDING () NO FURTHER ACTION (X) * PENDING () NO FURTHER ACTION ()

ENF DISP: NO VIABLE RESP PARTY () VOLUNTARY RESPONSE ()

ENFORCED RESPONSE () COST RECOVERY ()

SITE DESCRIPTION:

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

```

PAGE: 292
RUN DATE: 85/04/26
RUN TIME: 18:31:25

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ACTION:

EPA ID: GAD980600522 PROGRAM CODE: H01 PROGRAM TYPE:

PROGRAM NAME: SITE EVALUATION

DESCRIPTION:

*
 *
 *
 *

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

PAGE: 293
RUN DATE: 85/04/26
RUN TIME: 18:31:25

REGION: 04
STATE: GA

M.2 - EVENT MAINTENANCE FORM

* ACTION: -

SITE: GEORGIA-PACIFIC CORP STUD MILL
PROGRAM: SITE EVALUATION

EPA ID: GAD980600522 PROGRAM CODE: H01 EVENT TYPE: DS1

FMS CODE: EVENT QUALIFIER: EVENT LEAD: E

EVENT NAME: DISCOVERY STATUS:

DESCRIPTION:

* - - - - - *

* - - - - - *
* - - - - - *
* - - - - - *
* - - - - - *

| ORIGINAL | CURRENT | ACTUAL |
|----------|---------|-----------------|
| START: | START: | START: |
| COMP : | COMP : | COMP : 80/08/01 |

* - - - - - *
* - - - - - *

HQ COMMENT:

* - - - - - *

RG COMMENT:

* - - - - - *

COOP AGR # AMENDMENT # STATUS STATE #

* - - - - - *

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

REGION: 04
STATE: GA

PAGE: 294
RUN DATE: 85/04/26
RUN TIME: 18:31:25

M.2 - EVENT MAINTENANCE FORM

* ACTION: *

SITE: GEORGIA-PACIFIC CORP STUD MILL
PROGRAM: SITE EVALUATION

EPA ID: GAD980600522 PROGRAM CODE: H01 EVENT TYPE: PA1

FMS CODE: EVENT QUALIFIER: EVENT LEAD: S

EVENT NAME: PRELIMINARY ASSESSMENT STATUS:

DESCRIPTION:

ORIGINAL

CURRENT

ACTUAL

START: START: START: 85/04/19

COMP: COMP: COMP: 85/04/23

HQ COMMENT:

RG COMMENT:

COOP AGR # AMENDMENT # STATUS STATE #

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

PAGE: 295
RUN DATE: 85/04/26
RUN TIME: 18131125

REGION: 04
STATE: GA

M.2 - COMMENT MAINTENANCE FORM

SITE: GEORGIA-PACIFIC CORP STUD MILL

EPA ID: GAD980600522

CUM
NO COMMENT

ACTION

001 PART A- ON FILE

* - *
* - *



POTENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

REGION SITE NUMBER
IV 6AD980600522

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency, Site Tracking System, Hazardous Waste Enforcement Task Force (EN-335), 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME Georgia-Pacific Corp. Stud Mill
B. STREET Highway 83 South
C. CITY Monticello
D. STATE Georgia
E. ZIP CODE 31064

II. TENTATIVE DISPOSITION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

| RECOMMENDATION | MARK 'X' | ACTION AGENCY | | | |
|---|----------|---------------|-------|-------|---------|
| | | EPA | STATE | LOCAL | PRIVATE |
| A. NO ACTION NEEDED -- NO HAZARD | X | | | | |
| B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.) | | | | | |
| C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.) | | | | | |
| D. ENFORCEMENT ACTION NEEDED (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.) | | | | | |

E. RATIONALE FOR DISPOSITION

This site is a HWDMS referral. GA-Pacific filed a Part A protectively. No known or suspected burials or other hazardous waste disposal at site.

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (mo., day, & yr.)

G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME Camilla Bond Warren
2. TELEPHONE NUMBER FTS 257-2234
3. DATE (mo., day, & yr.) 4/22/85

III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

| 1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO. | 2. SCHEDULED DATE OF ACTION (mo., day, & yr.) | 3. TO BE PERFORMED BY (EPA, Contractor, State, etc.) | 4. ESTIMATED MANHOURS | 5. REMARKS |
|---|---|--|-----------------------|------------|
| a. TYPE OF SITE INSPECTION | | | | |
| (1) _____ | | | | |
| (2) _____ | | | | |
| (3) _____ | | | | |
| b. TYPE OF MONITORING | | | | |
| (1) _____ | | | | |
| (2) _____ | | | | |
| c. TYPE OF SAMPLING | | | | |
| (1) _____ | | | | |
| (2) _____ | | | | |

PRELIMINARY ASSESSMENT COVER SHEET
GEORGIA PACIFIC CORPORATION STUD MILL
MONTICELLO, GEORGIA - JASPER COUNTY
GAD980600522

A. HISTORY OF SITE

Georgia Pacific Corporation Stud Mill is located in Monticello, Georgia in Jasper County. Since 1969 this facility has been engaged in sawing and planing rough lumber from plywood peeler cores. According to Mr. Tom Stephens of Georgia Pacific, there has never been any on-site disposal of hazardous waste since the facility commenced operations.

B. NATURE OF HAZARDOUS MATERIALS

No hazardous waste is generated at this facility.

C. DESCRIPTION OF HAZARDOUS CONDITIONS, INCIDENTS, PERMIT VIOLATIONS

Not Applicable

D. ROUTES FOR CONTAMINATION

Not Applicable

E. POSSIBLE AFFECTED POPULATION AND RESOURCES

None

F. RECOMMENDATIONS AND JUSTIFICATIONS

A "no priority" for a Site Inspection is recommended for this facility based on the following conclusions:

No waste has been generated on site since operations began. Georgia Pacific's Part A application for a Hazardous Waste Handling Permit has been formally withdrawn. A small quantity generator status has been assigned to this facility in the event of future hazardous waste handling activities.

G. REFERENCES

EPA Part A Permit Application Form 3510-3
Georgia Pacific Personnel - Mr. Tom Stephens
Georgia EPD Industrial and Hazardous Waste Management Program Files-
Georgia Pacific Corporation Stud Mill - GAD980600522
Georgia EPD "Waste Management Data Sheet"
February 2, 1983 - Letter from Gerald W. Tice requesting Part A Permit
3510-3 withdrawal.



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D980600522

II. SITE NAME AND LOCATION

| | | | | | |
|--|----------------|---|---------------------|-----------------------|-------------------|
| 01 SITE NAME (Legal, common, or descriptive name of site) Georgia Pacific Corp. Stud Mill | | 02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER Highway 83 South | | | |
| 03 CITY Monticello | 04 STATE GA | 05 ZIP CODE 31064 | 06 COUNTY Jasper | 07 COUNTY CODE 159 | 08 CONG DIST 8 |
| 09 COORDINATES LATITUDE 33° 16' 33.0" N | | LONGITUDE 083° 42' 19.0" W | | | |
| 10 DIRECTIONS TO SITE (Starting from nearest public road) From intersection of GA Hwys. 16 and 83 in downtown Monticello, go south on Hwy 16 for approx. 2.2 miles (past water tower on right and through the town of Minneta) and turn left (SE) onto County Road 127. Continue for 3/4 mile. Facility is on left (SW). | | | | | |

III. RESPONSIBLE PARTIES

| | | | | | |
|--|----------------|--|---------------------------------------|--|--|
| 01 OWNER (If known) Georgia Pacific Corporation | | 02 STREET (Business, mailing, residential) 133 Peachtree Street, NE | | | |
| 03 CITY Atlanta, | 04 STATE GA | 05 ZIP CODE 30303 | 06 TELEPHONE NUMBER (404) 521-4000 | | |
| 07 OPERATOR (If known and different from owner) Same as above | | 08 STREET (Business, mailing, residential) | | | |
| 09 CITY | 10 STATE | 11 ZIP CODE | 12 TELEPHONE NUMBER () | | |
| 13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN | | | | | |
| 14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input checked="" type="checkbox"/> A. RCRA 3001 DATE RECEIVED: 11/19/80 <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ <input type="checkbox"/> C. NONE MONTH DAY YEAR MONTH DAY YEAR | | | | | |

IV. CHARACTERIZATION OF POTENTIAL HAZARD

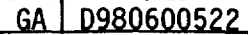
| | | | | | |
|--|--|---|--|--|--|
| 01 ON SITE INSPECTION <input type="checkbox"/> YES DATE ____/____/____ <input checked="" type="checkbox"/> NO MONTH DAY YEAR | | BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____ | | | |
| 02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN | | 03 YEARS OF OPERATION 1969 Present <input type="checkbox"/> UNKNOWN BEGINNING YEAR ENDING YEAR | | | |
| 04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED According to the GA EPD "Waste Management Data Sheet", no known hazardous waste was ever generated or disposed at this Georgia Pacific Facility. | | | | | |
| 05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION No known or suspected hazard to the population or environment is evident at this facility. | | | | | |

V. PRIORITY ASSESSMENT

| | | | |
|--|--|--|--|
| 01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspect on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current disposition form) | | | |
|--|--|--|--|

VI. INFORMATION AVAILABLE FROM

| | | | | | |
|---|--|---|----------------------------|-------------------------------------|---------------------------------------|
| 01 CONTACT Tom Stephens | | 02 OF (Agency/Organization) Georgia Pacific Corp.-Env. Support Group | | 03 TELEPHONE NUMBER 404 521-5080 | |
| 04 PERSON RESPONSIBLE FOR ASSESSMENT Jeff Williams | | 05 AGENCY DNR | 06 ORGANIZATION EPD-RAU | 07 TELEPHONE NUMBER 404 656-7404 | 08 DATE 04 01 85 MONTH DAY YEAR |





POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D980600522

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ B. SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) 04 NARRATIVE DESCRIPTION

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D980600522

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (Include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills, runoff, standing liquids/leaking drums)

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

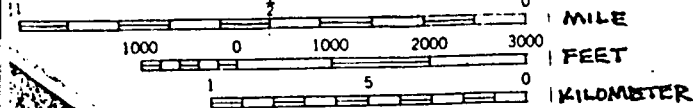
05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

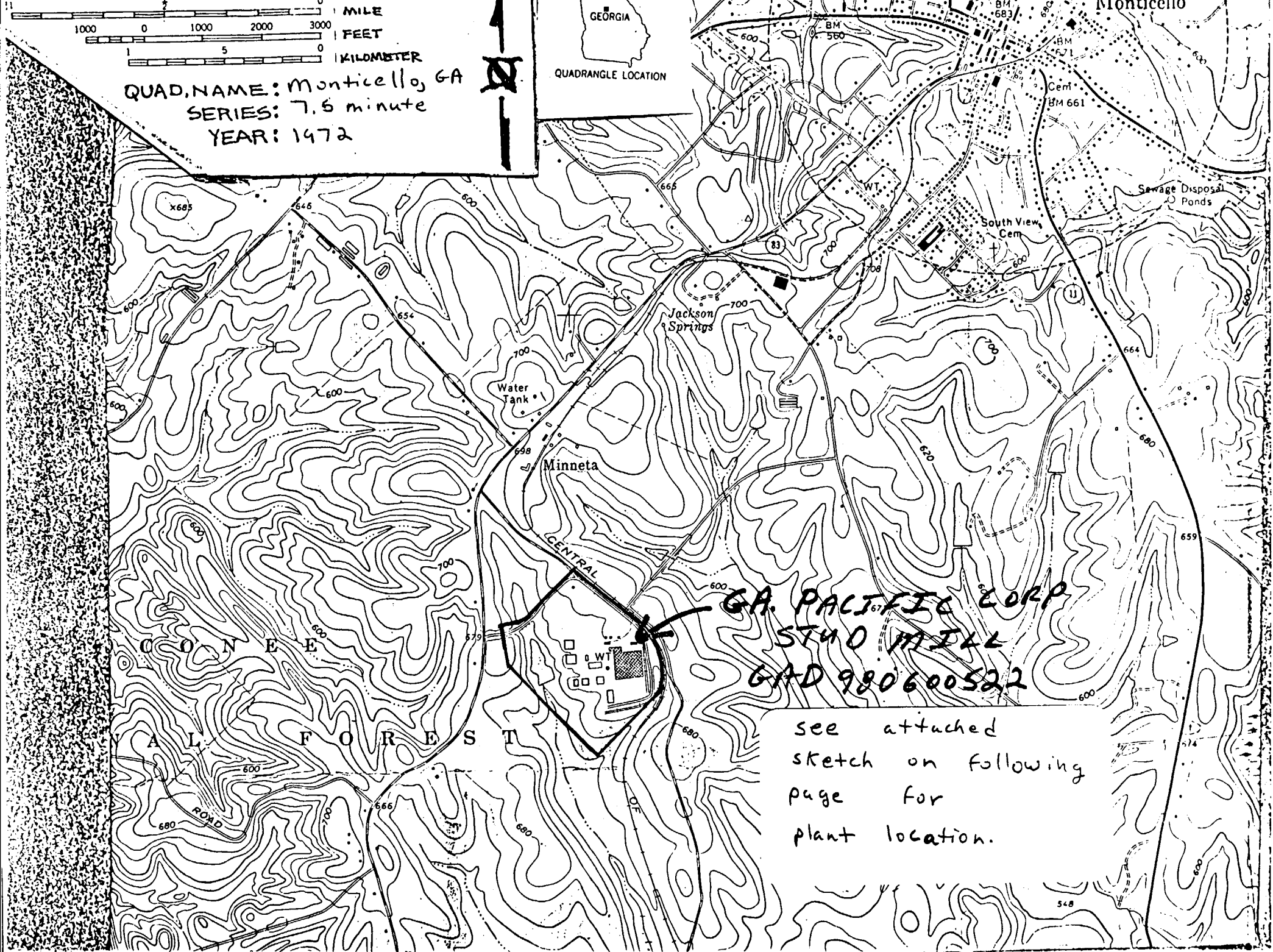
IV. COMMENTS

No known incidence of spills or hazardous conditions have occurred at this facility according to Mr. Tom Stephens of Georgia Pacific.

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)



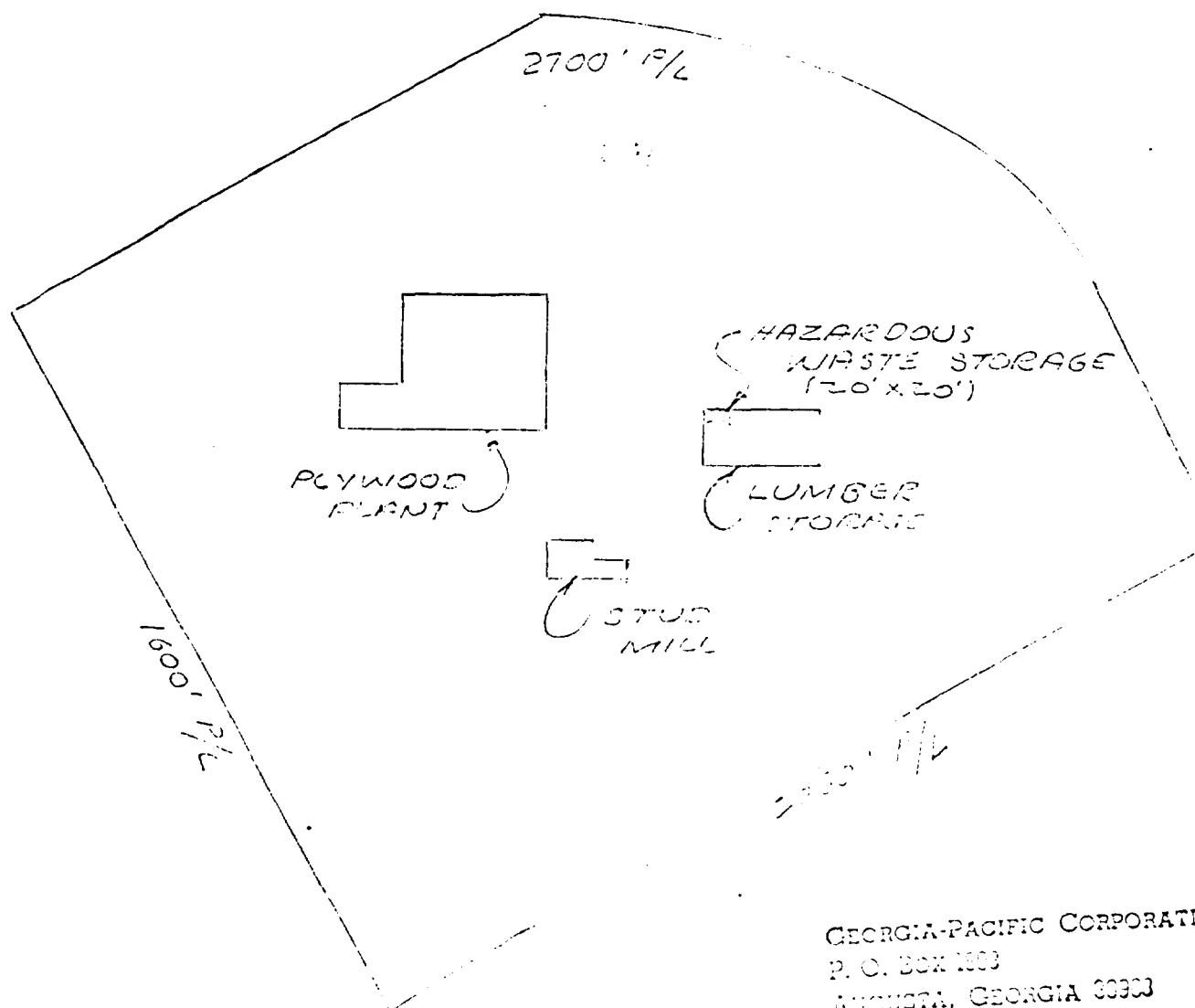
QUAD. NAME: Monticello, GA
SERIES: 7.5 minute
YEAR: 1972



GA. PACIFIC CORP
STUD MILL
GAD 980600522

see attached
sketch on following
page for
plant location.

V. FACILITY DRAWING (see page 4.)



GEORGIA-PACIFIC CORPORATION
P.O. BOX 1003
AUGUSTA, GEORGIA 30903

GEORGIA-PACIFIC CORP
STUD MILL

DEPARTMENT OF NATURAL RESOURCES
ENVIRONMENTAL PROTECTION DIVISION

WASTE MANAGEMENT DATA SHEET

GAD980600522 Stud Mill Monticello - Jasper

NAME AND LOCATION OF FACILITY

GEORGIA-PACIFIC CORPORATION - MONTICELLO STUD MILL

HIGHWAY 83

MONTICELLO, GEORGIA 31064

PERSON TO CONTACT

(ENTER THE NAME, ADDRESS, TITLE AND BUSINESS TELEPHONE NUMBER OF
THE PERSON TO CONTACT REGARDING INFORMATION SUBMITTED ON THIS FORM).

TOM B. STEVENS - ENVIRONMENTAL ENGINEER

P. O. BOX 105603

ATLANTA, GEORGIA 30348

404-521-5080

DATES OF WASTE HANDLING

(ENTER THE YEARS THAT YOU ESTIMATE WASTE TREATMENT, STORAGE OR DISPOSAL
BEGAN AND ENDED AT THE SITE. IF YOU SELECTED A FACILITY OFF-SITE PLEASE
NOTE AND EXPLAIN IN "COMMENTS" SECTION.

PLANT START-UP DATE 1969

GENERAL TYPE OF WASTE

- | | |
|---------------------|----------------------------------|
| 1- () ORGANICS | 7- () BASES |
| 2- () INORGANICS | 8- () PCB's |
| 3- () SOLVENTS | 9- () MIXED MUNICIPAL WASTE |
| 4- () PESTICIDES | 10- () UNKNOWN |
| 5- () HEAVY METALS | 11- () OTHER (SPECIFY) |
| 6- () ACIDS | 12- NO HAZARDOUS WASTE GENERATED |

WASTE QUANTITY (ESTIMATED)

HAS THERE EVER BEEN A SPILL OR DISCHARGE OF A HAZARDOUS SUBSTANCE FROM YOUR
FACILITY? (BRIEFLY EXPLAIN THE NATURE OF THE RELEASE).

NO

COMMENTS

(IF THERE IS ANY COMMENTS THAT YOU BELIEVE WOULD CLARIFY THE PAST WASTE HANDLING PRACTICES OF YOUR FACILITY OR OF FACILITIES YOU SELECTED TO HANDLE YOUR WASTE, PLEASE ELABORATE IN THE SPACE PROVIDED).

NO

SIGNATURE AND TITLE TOM B. STEVENS

404-521-5080

NAME

TELEPHONE

133 PEACHTREE ST. N.E. 16th Floor
STREET

ATLANTA, GEORGIA

30303

CITY

STATE

ZIP CODE

Tom B. Stevens
SIGNATURE

3-22-85
DATE



JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

Mr. Gerald W. Tice
Senior Environmental Engineer
Georgia Pacific Corporation
133 Peachtree Street, N.E.
Atlanta, GA 30303

Monticello Stud Mill T
Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

March 3, 1983

RE: Request for Facility Status
Changes for Georgia Pacific Corp.,
Monticello, GAT150011153

Dear Mr. Tice:

This will acknowledge receipt of your request for withdrawal of your application for a Hazardous Waste Facility permit.

Based on the information provided, withdrawal of your application is warranted and your permit application has been placed in our inactive files. As requested, your status has been changed to a small quantity generator and your EPA Identification Number has been retained.

Please be advised that withdrawal of your permit application invalidates any variance that you received to continue existing hazardous waste treatment storage or disposal during the permit review process and that based on our concurrence with your withdrawal request, the Federal Environmental Protection Agency will terminate your facility's interim status.

Should you wish to treat, store, or dispose of hazardous waste in the future, it will be necessary that a hazardous waste handling permit be issued, prior to the construction of such facilities, under authority of Section 8 of the Georgia Hazardous Waste Management Act and paragraphs .10 and .11 of Georgia's Rules for Hazardous Waste Management, Chapter 391-3-11.

If further clarification is needed on this matter, please feel free to contact Mr. Robert Rose at 404/656-7802.

Sincerely,

John D. Taylor, Jr.
Program Manager
Industrial & Hazardous Waste
Management Program

JDT:rrk:2434C

cc: James H. Scarbrough
Moses N. McCall, III
File: Ga. Pacific-Monticello-Stud Mill (Y)



Georgia-Pacific Corporation Southern Division
133 Peachtree Street, N.E.
Atlanta, Georgia 30303
Telephone (404) 521-4000
Teletype (810) 751-1000

February 2, 1983

Mr. Robert I. Rose,
Environmental Specialist
Industrial and Hazardous Waste Management
Environmental Protection Division
270 Washington Street, S. W.
Atlanta, Georgia 30334

RECEIVED

FEB - 4 1983

ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

Re: Part A (Interim Status) Withdrawal Request
Generator Notification Withdrawal Request

Dear Mr. Rose:

As we discussed, Georgia-Pacific formally requests the withdrawal of it's Part A RCRA permit applications (or interim status), for the Georgia-Pacific locations shown on the enclosed sheet.

At the time these applications were filed with EPA, it was felt there may be the need for a small storage facility at these locations, however, as indicated below, this need never materialized and, based on present and projected operating conditions, we do not anticipate the need for such facilities.

Also, we request that our status as a generator of hazardous waste at these locations, including those locations which notified as generators only, be changed to inactive status since we have determined that no hazardous waste is generated. This determination has been made as the result of test, change in product formulation or simply because some wastes were never generated. We still want to retain our EPA I. D. numbers in the event hazardous waste is generated in the future.

Your early review of our request will be appreciated. Please let me know if there are any questions.

Very truly yours,

Gerald W. Tice
Senior Environmental Engineer
Southern Division

GWT:gr

Enclosure

cc: Georgia Plant and Timber Department Managers

GEORGIA-PACIFIC CORPORATION
LOCATIONS REQUESTING WITHDRAWAL
OF PART A APPLICATIONS AND
WITHDRAWAL OF GENERATOR NOTIFICATION

Locations Filing Part A RCRA Applications and Notifying as Hazardous Waste Generators:

| <u>LOCATION</u> | <u>TYPE FACILITY</u> | <u>EPA I.D. NUMBER</u> |
|--------------------------|----------------------|------------------------|
| ✓1. Claxton, Ga. | Chip-N-Saw | GAD093703650 |
| ✓2. Clyo, Ga. | Timber | GAD000735829 |
| ✓3. <u>Durand, Ga.</u> | Plywood | GAD030035497 |
| ✓4. Ellabelle, Ga. | Sawmill | GAD000735779 |
| ✓5. Milledgeville, Ga. | Timber | GAD000814376 |
| ✓6. McRae, Ga. | Hardwood Sawmill | GAD000735803 |
| ✓7. Monticello, Ga. | Panelboard | - GAD000814368 |
| ✓8. Monticello, Ga. | Plywood | - GAD057270449 |
| ✓9. Monticello, Ga. | Stud Mill | - GAT150011153 |
| ✓10. Port Wentworth, Ga. | Hardwood Sawmill | GAD000735795 |
| ✓11. Vienna, Ga. | Particleboard | GAT150011104 |
| 12. Warrenton, Ga. | Chip-N-Saw | GAD079381323 |

Locations Filing Only Hazardous Waste Generator Notifications:

| <u>LOCATION</u> | <u>TYPE FACILITY</u> | <u>EPA I.D. NUMBER</u> |
|--------------------|----------------------|------------------------|
| 1. Durand, Ga. | Timber | GAD000735787 |
| 2. Monticello, Ga. | Timber | GAT150011187 |
| 3. Rincon, Ga. | Timber | No Number on file |
| 4. Savannah, Ga. | Timber | No Number on file |

Part A, Permit Process --- Internal Checklist

ID Number GAT 150011 153 Inst Name GA-PACIFIC STUD MILL

| Refer to Form No: | Interim Regulatory Requirements | Indicate by your initials: | | Valid Prmlyg Date? |
|----------------------|---|-------------------------------|-----|--------------------------|
| | | Yes | No | |
| 1 | T/S/D Facility? (If No, return to respondent.) | PK | ___ | ___ |
| 3 | Form 1 received? | PK | ___ | ___ |
| 1 | Form 3 received? | PK | ___ | ___ |
| 1 & 3 | Postmarked on or before November 19, 1980? | PK | ___ | ___ |
| 3 | Date of operation entered? | PK | ___ | ___ |
| 3 | Date of operation on or before November 19, 1980? | PK | ___ | ___ |
| Notif. record | Notifier? | PK | ___ | ___ |
| " | Notified on or before August 18, 1980? | PK | ___ | ___ |
| 1 | Form 1, XIII B signed? | PK | ___ | ___ |
| 3 | Form 3, IX B Signed? | PK | ___ | ___ |

(If all ten items above are initialed in the Yes column, generate Interim Status Acknowledgement and indicate the trigger date here:

12/19/80

PHASE TWO

| | | | |
|-------|--|-----|-----|
| 1 | Unsure if regulated or non-regulated? | ___ | ___ |
| 3 | New facility? | ___ | ___ |
| 1 & 3 | Core items missing? If Yes, indicate which items: Facility name___; location___; mail address___; operator info___; certification___; process info___; waste info___; owner___; sigs___. | | |

PHASE THREE

| | |
|-------|--|
| 1 & 3 | Non-core items missing? If Yes, indicate which items: Maps___; photos___; drawings___; lat/long___. Other observations and comments: |
|-------|--|

Received Date Stamp

Log out/Log in
on reverse side

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

| A. FIRST | | | | | | | | | | B. SECOND | | | | | | | | | |
|----------|----|-----------|----|----|----|---------------------|----|----|----|-----------|----|-----------|-----------|----|----|--|--|--|--|
| C | 7 | 2 | 4 | 2 | 1 | (specify) | | | | | C | 7 | (specify) | | | | | | |
| 18 | 19 | 20 | 21 | 22 | 23 | Sawmill/Planer Mill | | | | | 24 | 25 | 26 | 27 | 28 | | | | |
| C. THIRD | | | | | | | | | | D. FOURTH | | | | | | | | | |
| C | 7 | (specify) | | | | | | | | C | 7 | (specify) | | | | | | | |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | | | | |

VIII. OPERATOR INFORMATION

| A. NAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | B. Is the name listed in Item VIII-A also the owner? | | | | |
|--|----|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|-------------|----|----|----------------------------|---|----|----|----|---|----|----|----|----|
| C | 8 | GEORGIA - PACIFIC CORPORATION - AUGUSTA GA. | | | | | | | | | | | | | | | | | | | | | | | | | | | | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 66 | | | | |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | | |
| C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.) | | | | | | | | | | | | | | | | | | | | | | | | | D. PHONE (area code & no.) | | | | | | | | | |
| F = FEDERAL M = PUBLIC (other than federal or state) S = STATE O = OTHER (specify) P = PRIVATE | | | | | | | | | | | | | | | | | | | | | | | | | (specify) Private | | | | | C A 4 0 4 7 2 4 7 1 5 1 15 16 17 18 19 20 21 22 23 24 25 | | | | |
| E. STREET OR P.O. BOX | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| P O BOX 1808 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 |
| F. CITY OR TOWN | | | | | | | | | | | | | | | | | | | | G. STATE | | H. ZIP CODE | | | | IX. INDIAN LAND | | | | | | | | |
| B AUGUSTA | | | | | | | | | | | | | | | | | | | | GA | | 3 0 9 0 3 | | | | Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 52 | | | | | | | | |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | | |

X. EXISTING ENVIRONMENTAL PERMITS

| A. NPDES (Discharges to Surface Water) | | | | | | | | | | D. PSD (Air Emissions from Proposed Sources) | | | | | | | | | | | | | | | | | | | | | | |
|--|----|----|----|----|----|----|----|----|----|--|----|----|-------------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| C | 9 | N | | | | | | | | | C | 9 | P | | | | | | | | | | | | | | | | | | | |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 |
| B. UIC (Underground Injection of Fluids) | | | | | | | | | | E. OTHER (specify) | | | | | | | | | | | | | | | | | | | | | | |
| C | 9 | U | | | | | | | | | C | 9 | 2 4 2 1 0 7 9 6 0 1 8 0 | | | | | | | | | | | | | | | | | | | |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 |
| C. RCRA (Hazardous Wastes) | | | | | | | | | | E. OTHER (specify) | | | | | | | | | | | | | | | | | | | | | | |
| C | 9 | R | | | | | | | | | C | 9 | | | | | | | | | | | | | | | | | | | | |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 |

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

"This establishment is primarily engaged in sawing and planing rough lumber from plywood peeler cores.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| A. NAME & OFFICIAL TITLE (type or print) | B. SIGNATURE | C. DATE SIGNED |
|--|------------------------|----------------|
| H. S. Mersereau- Senior Vice President | <i>H. S. Mersereau</i> | NOV 12 1980 |

COMMENTS FOR OFFICIAL USE ONLY

| C |
|----|
| 18 |

| | | | | | |
|------------------------------------|--|--|--|--|--|
| FORM 1 GENERAL | | U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION <i>Consolidated Permits Program</i> (Read the "General Instructions" before starting.) | | I. EPA I.D. NUMBER FGAT150011153 | |
| LABEL ITEMS | | PLEASE PLACE LABEL IN THIS SPACE | | GENERAL INSTRUCTIONS | |
| II. EPA I.D. NUMBER | | | | If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete a item if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected. | |
| III. FACILITY NAME | | | | | |
| V. FACILITY MAILING ADDRESS | | | | | |
| VI. FACILITY LOCATION | | | | | |

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

| SPECIFIC QUESTIONS | MARK 'X' | | | SPECIFIC QUESTIONS | MARK 'X' | | |
|--|----------|----|---------------|--|----------|----|---------------|
| | YES | NO | FORM ATTACHED | | YES | NO | FORM ATTACHED |
| A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A) | | X | | B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B) | | X | |
| C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C) | | X | | D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D) | | X | |
| E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3) | X | | X | F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4) | | X | |
| G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4) | | X | | H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4) | | X | |
| I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5) | | X | | J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5) | | X | |

III. NAME OF FACILITY

1 SKIP GEORGIA-PACIFIC CORPORATION, STUDD MILL

IV. FACILITY CONTACT

| A. NAME & TITLE (last, first, & title) | | B. PHONE (area code & no.) | | |
|--|---------------------------------|----------------------------|-----|------|
| 2 | TICE GERALD - ENVIRONMENTAL ENG | 404 | 724 | 7151 |

V. FACILITY MAILING ADDRESS

| A. STREET OR P.O. BOX | | B. CITY OR TOWN | C. STATE | D. ZIP CODE |
|-----------------------|---------------|-----------------|----------|-------------|
| 3 | P.O. BOX 1808 | AUGUSTA | GA | 30903 |

VI. FACILITY LOCATION

| A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER | | B. COUNTY NAME | | C. CITY OR TOWN | D. STATE | E. ZIP CODE | F. COUNTY CODE |
|---|------------------|----------------|--|-----------------|----------|-------------|----------------|
| 5 | HIGHWAY 83 SOUTH | JASPER | | MONTICELLO | GA | 31064 | |

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

| ENGLISH UNIT OF MEASURE | CODE | METRIC UNIT OF MEASURE | CODE |
|-------------------------|------|------------------------|------|
| POUNDS | P | KILOGRAMS | K |
| TONS | T | METRIC TONS | M |

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.

2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "Included with above" and make no other entries on that line.

3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

| LINE NO. JZ | A. EPA HAZARDOUS WASTE NO. (enter code) | B. ESTIMATED ANNUAL QUANTITY OF WASTE | C. UNIT OF MEASURE (enter code) | D. PROCESSES | |
|----------------|--|---------------------------------------|------------------------------------|-----------------------------|--|
| | | | | 1. PROCESS CODES (enter) | 2. PROCESS DESCRIPTION (if a code is not entered in D(1)) |
| X-1 | K 0 5 4 | 900 | P | T 0 3 D 8 0 | |
| X-2 | D 0 0 2 | 400 | P | T 0 3 D 8 0 | |
| X-3 | D 0 0 1 | 100 | P | T 0 3 D 8 0 | |
| X-4 | D 0 0 2 | | | | included with above |

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

| | | | | | | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|-----|---|
| EPA I.D. NO. (enter from page 1) | | | | | | | | | | | | | |
| F | G | A | T | 1 | 5 | 0 | 0 | 1 | 1 | 1 | 5 | T/A | C |
| | | | | | | | | | | | | 6 | |

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

| LATITUDE (degrees, minutes, & seconds) | | | | | | | | | | LONGITUDE (degrees, minutes, & seconds) | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|--|--|--|
| 3 | 3 | 1 | 6 | 3 | 3 | N | 0 | 8 | 3 | 4 | 2 | 1 | 9 | W | | | | | |

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

| | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|--|--|--|--|--|--|--|--|--|--------------------------------|--|--|--|--|--|--|--|--|--|
| 1. NAME OF FACILITY'S LEGAL OWNER | | | | | | | | | | 2. PHONE NO. (area code & no.) | | | | | | | | | |
| 3. STREET OR P.O. BOX | | | | | | | | | | 4. CITY OR TOWN | | | | | | | | | |
| 5. ST. | | | | | | | | | | 6. ZIP CODE | | | | | | | | | |

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| | | |
|-------------------------|-----------------|----------------|
| A. NAME (print or type) | B. SIGNATURE | C. DATE SIGNED |
| H. S. Mersereau | H. S. Mersereau | NOV 12 1980 |

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| | | |
|-------------------------|-----------------|----------------|
| A. NAME (print or type) | B. SIGNATURE | C. DATE SIGNED |
| H. S. Mersereau | H. S. Mersereau | NOV 12 1980 |

| EPA I.D. NUMBER (enter from page 1) | | | | | | | | | | | | | FOR OFFICIAL USE ONLY | | | | | | | | | | | | | |
|---|--------------------------------------|----|----|----|---------------------------------------|---------------------------------|--------------------------|----|----|----|----|----|-----------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|
| W G A T 1 5 0 0 1 1 1 5 3 1 | | | | | | | | | | | | | W DUP 2 DUP | | | | | | | | | | | | | |
| IV. DESCRIPTION OF HAZARDOUS WASTES (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LINE NO. | A. EPA HAZARD. WASTENO. (enter code) | | | | B. ESTIMATED ANNUAL QUANTITY OF WASTE | C. UNIT OF MEASURE (enter code) | D. PROCESSES | | | | | | | | | | | | | | | | | | | |
| | | | | | | | 1. PROCESS CODES (enter) | | | | | | | | | | | | | | | | | | | |
| | 23 | 24 | 25 | 26 | | | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 |
| 1 | K | 0 | 0 | 1 | 16,300 | P | S | 0 | 1 | | | | | | | | | | | | | | | | | |
| 2 | D | 0 | 0 | 0 | 20,000 | P | S | 0 | 1 | | | | | | | | | | | | | | | | | |
| 3 | D | 0 | 0 | 7 | | | | | | | | | | | | | | | | | | | | | | |
| 4 | D | 0 | 0 | 8 | | | | | | | | | | | | | | | | | | | | | | |
| 5 | F | 0 | 0 | 1 | 375 | P | S | 0 | 1 | | | | | | | | | | | | | | | | | |
| 6 | F | 0 | 0 | 3 | | | | | | | | | | | | | | | | | | | | | | |
| 7 | F | 0 | 0 | 5 | | | | | | | | | | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | | | | | | | | | | | | | |
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